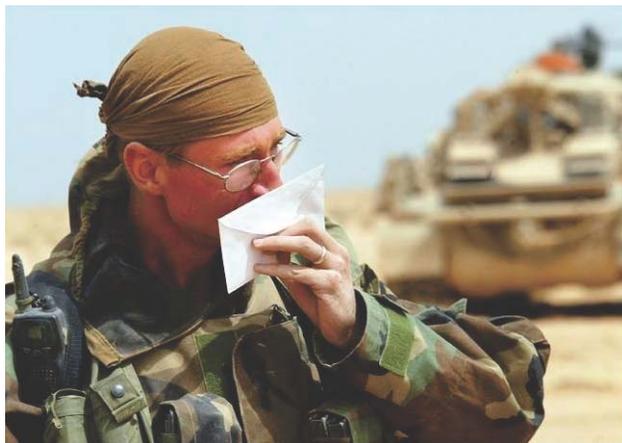




U.S. Army Center for Health Promotion and Preventive Medicine

The Sentinel



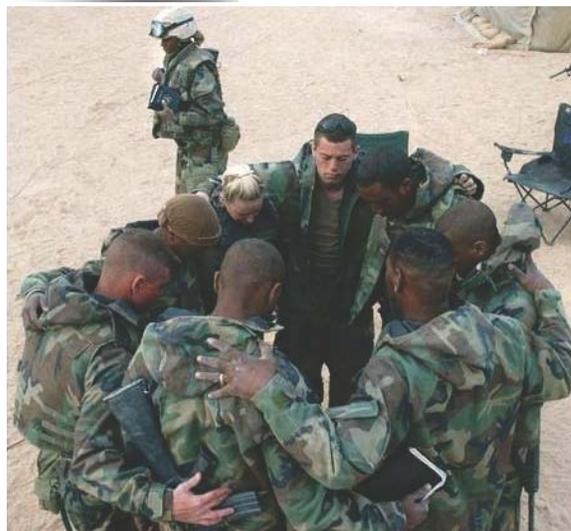
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Romeo Gacad/AFP

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“YELLOW RIBBON CAMPAIGN”

By: Linda Patrick

The Yellow Ribbon has long been associated with waiting for the return home of loved ones serving in the military. The Yellow Ribbon campaign was started by Jay Randolph and his Armament Squad from the Aviation Platoon of F Company, 25th Combat Aviation Brigade of Fort Campbell, Kentucky in 1979, as a support program for the 25th CAB.

In 1981, it was expanded as support for all of Fort Campbell, and then in 1982 was again expanded for support to everyone serving in the Army. In 1991, it became the support for all services of the military. As of 9/11, it became the support for emergency personnel who risk their lives to protect and save our Nation’s freedom.

Individuals display the yellow ribbon to reflect their support of this country’s military men and women serving so honorably and valiantly overseas. We are supporting all efforts in protecting our freedom and our American way of life.

We need to show unity and patriotism. Support our troops with yellow ribbons everywhere on trees, mailboxes, office buildings, and our homes. We are still at war, and we still have those who are missing in action, prisoners of war, or injured, and casualties. They are our soldiers, families, friends, protectors, and hero’s.

Our message is not one of pro-war or anti-war but for support of the brave sons and daughters who serve America faithfully in the United States military.

(yellow ribbon campaign flags by: Joyce Kopatch)



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Commander...BG William T. Bester

Acting Public Affairs Officer...Anne Gibson
Editor...Anne Gibson
Assistant Editor...Linda D. Patrick



EVIDENCE THE ARMY CARES ABOUT SOLDIERS

By: COL John Ciesla
Manager, Health Hazard Assessment Program,
Directorate of Occupational Health Sciences

Exactly four years ago (!), I took command of CHPPM-West at Fort Lewis, Washington, and in the course of my remarks to the group of assembled soldiers and family members at the change of command ceremony I made the statement: "The existence of an organization like CHPPM-West is tangible proof that the Army cares about its soldiers, civilian employees, and family members."

I viewed this remark as a sort of preemptive strike on the audience, which included LTG George Crocker, the Commander of I Corps and Fort Lewis. In March 1999, CHPPM-West had just relocated to Fort Lewis from U.S. Army Garrison Fitzsimons in Aurora, Colorado. Most people at Fort Lewis – to include the good folks over at Madigan Army Medical Center – had no real idea what CHPPM-West, or CHPPM in general, was all about. You could summarize the common attitude with the following question: What do you guys (CHPPM) do for the soldier?

The answer to that question remains the same in 2003 as it was in 1999. The existence of an organization like CHPPM is tangible proof that the Army cares about its people. As noble as it is to be able to restore health, I believe the greater service is to protect the health – and thereby readiness – of America's Army. Force health protection is more important than force health restoration in an era of high intensity military operations of relatively short duration coupled with a shrinking medical footprint in the area of operations.

CHPPM contributes to force health protection every day, with activities ranging from deployment environmental surveillance support to deployed forces; health promotion and occupational health

services for the Army worldwide; guidance for the design and procurement of new equipment and materiel; operation of world-class laboratory facilities; and environmental health and engineering support that is second to none in the Defense Department. CHPPM is in the forefront of developing new guidelines to help commanders execute their risk management responsibilities and helping the Army, DOD, and Nation respond to the threat from chemical, radiological, and biological weapons of mass destruction.

Maintaining support that is both timely and relevant to the Army's needs requires the ongoing cooperation of a dedicated team of military and civilian professionals. There are two ways of categorizing people at CHPPM: military and civilian, and/or as technical staff and support staff. As in any organization, there is a temptation on the part of some to try and categorize one group as more important than the other. But this would be simplistic and wrong.

First of all, military and civilian personnel bring different strengths to CHPPM. Our civilian technical staff ensures stability and continuity, something essential for a scientific organization. Civilian professionals specialize and develop a degree of expertise in a particular field that is not possible for most of us in uniform – particularly as field grade officers or senior non-commissioned officers. As our ultimate experts, CHPPM's staff of civilian scientists and engineers is indispensable for the execution of our technical missions in support of the Army.

Although many of our military personnel can boast impressive technical expertise themselves, the unique thing they bring to our organization is their familiarity with the constantly changing needs and expectations of the Army in both the field and at the installation level. Because they may move in and

(continued on page 8)

MILITARY NEWS**ARRIVALS**

MAJ Sandra Alvey – DCSOPS
 SPC Joseph Guillory – CHPPM-Pacific
 2LT Jason Krantz – CHPPM-North
 SPC Shawna Hutton – CHPPM-Europe
 SPC Dwayne Pernell – CHPPM-Pacific
 PFC Raul Villalobos – DLS
 SPC Glen Williams – CHPPM-Europe

AWARDS and RECOGNITIONS**Army Commendation Medal**

1SG Robert Carpenter – DLS
 LTC James Carroll – DEDES
 LTC Michael Custer – DHPW

Army Achievement Medal

SPC Gerbert Flores-Chavez – DLS
 CPT Laura Kwasniak – CHPPM-West
 CPT Scott Newkirk – DCSOPS
 CPT Art Onwan – DOHS

Meritorious Service Medal

LTC James Carroll – DEDES
 MAJ Phillip Cosby – DOEM
 CPT Brian Paulus – DTOX
 COL Kotu “KK”Phull – DEHE

DEPARTURES

CPT Richard Arday – CHPPM-North
 MAJ Ann Crosby – DHPW
 SSG David Guerra – CHPPM-Europe
 MAJ Jennifer Johnson – CHPPM-Europe
 LTC Sharon Reese – DHPW
 PV1 Darrell Taylor – DEHE

DA Certificate of Achievement – Guatemalan, Subject Matter Experts Exchange and Commander’s Coin

COL John Ciesla – DOHS
 COL Kotu Phull – DEHE
 LTC Sharon Reese – DHPW

RETIREMENT

COL Walter “Gene” Egerton – DEDES

PROMOTIONS

SFC Jerry Beatty to MSG
 PFC Kristin Havrilka to SPC
 SPC Erica Noble to SGT

Winning Spirit Award & Commander’s Coin

CPT Sueann Ramsey – CHPPM-Pacific

PROMOTION

SFC Jennifer Brown was promoted to MSG by COL Gemryl Samuels, Directorate of Health Promotion and Wellness. Brown entered the Army in 1985. Her military experiences and travels have taken her to Fort Greely, Alaska; Fort Bragg, North Carolina; and Fort Eustis, Virginia. Brown deployed to Saudi Arabia during Operation Desert Storm. Her military duties includes: Administrative Specialist, Shift Leader, Noncommissioned Officer-in-Charge of Clinical Dietetics, NCOIC of Trifood and Training, NCOIC Nutrition Care Division, NCOIC of Director of Health

Promotion and Wellness, Platoon Sergeant and First Sergeant. Brown reclassified as a Nutrition Care Specialist in 1989. She has a Bachelor of Science in Food and Nutrition and a Master of Science in Health Service Administration. Her military awards and decorations include: the Meritorious Service Medal (2nd award), Army Commendation Medal and the Army Achievement Medal (6th award), Army Good Conduct Medal (5th award), National Defense Service Medal with star, Noncommissioned Officer Development Ribbon (4th award), the Army Service Ribbon and the Overseas Ribbon. Brown lives in Edgewood, Maryland with her son, Julian.

(continued on page 24)

CIVILIAN NEWS

ARRIVALS

Katarina Ashburn – CHPPM-Europe
Scott Dible – CHPPM-Europe
Patrick Moscato – DOHS
Steven Richards – DEHE
Richard Rupert – DHRM
Steven Sheely – DLS
Tuduyen Wilson – DEHE

AWARDS and RECOGNITIONS

Department of the Army Certificate of Achievement

Victoria Belfit – DEHE
Jacqueline Howard – DOHS
Jennifer Keetley – DHPW
William Russell – DOHS
James Sheehy – DHRM
James Wood – DEHE

Star Note & Commander's Coin BG Ursone

Richard Coale – DCSLOG

U.S. Army-Japan Superior Accomplishment Certification

Keiko Eguchi – CHPPM-Pacific
Laura Hamilton – CHPPM-Pacific
Masako Kondo – CHPPM-Pacific
Hiroaki Tani – CHPPM-Pacific

Service Certificate & Pin

Robert McKenzie – DLS, 30-Yr
Thomas Smith – DHPW, 25-Yr
Ken Williams – DLS, 30-Yr

DEPARTURES

Chester Clarke – DOEM
Patricia Cowin – DOHS
Jeffrey Deems – CHPPM-Europe
Trinee Few – DLS
Jason Helton – DCSIM
Karlyn Hughes – DHRM
Candance Jones – DHPW
Yvonne Lisa Laurie – DCSRM
Trenna Manners – DOHS
Linette Martinez – DLS
Marshawny Moore – DCSIM
Kelly Naito – CHPPM-Europe
Jeffrey Van Bommel – DCSIM
Lorraine Zinn – CHPPM-Europe

MEDCOM Journalism Award - Sentinel

Anne Gibson – DCSIM

Performance Awards

Coleen Weese – DOEM

Quality Step Increase

Heather Johnson – DEHE
Brenda Wolbert – DOHS

Employees of the Quarter 1st Qtr

Civilian Employee

Joyce Kopatch – DCSIM

Professional Associate 1st Qtr

Luis Estrada – DCSIM

Winning Spirit Award

Masahiro Iwakami – CHPPM-Pacific
Marie Kawasaki – CHPPM-Pacific
James Keller – CHPPM-Pacific



COLONEL KK PHULL RETIRES AFTER 28 + YEARS

By: Angela Conlon
Directorate of Environmental Health Engineering



COL Kotu K (KK) Phull retired on April 30, with over 28 years of selfless and dedicated service to our great Nation. His Army journey took him and his family to many parts of the United States and overseas. He spent a total of nearly 18 years at the Army Environmental Health Agency now CHPPM or one of its regional offices. Phull served in a variety of assignments ranging from project officer to program manager to a staff officer at HQ, U.S. Army Europe and the Army Secretariat, and commander of CHPPM-North and CHPPM-Pacific. He was a superb supervisor, manager, and leader. He was an effective mentor and role model to subordinates, peers, and supervisors. A true visionary, exemplary devotion to duty, professional excellence, and demonstrated initiative and innovation - best describe the values and attributes of Phull, an accomplished engineer and a great human being.

Phull immigrated to the U.S. in 1969 from a small village (Dasuya) in Northern India. His academic accomplishments include a Bachelor's degree in Civil and Municipal Engineering from Benares Hindu University, India, a Master's in Civil (Sanitary) Engineering from Colorado State University, a Master's in Administration (Procurement and Contracting) from George Washington University, and a degree of Doctor of Philosophy in Civil (Environmental) Engineering from the University of Maryland, Baltimore, Maryland. Additionally, Phull is a graduate of the Army's Command and General Staff College and the U.S. Army War College.

Fascination for the Army uniform ever since he was a child and his desire to expedite his U.S. naturalization are the reasons that Phull joined the Army in 1975. Although he joined the Army for a three-year period, the Army proved to be so good to him and his family that he continued an additional 25 years. "I couldn't have asked for a

better professional career" is what I have heard Phull state so many times during the short time that I had the pleasure of working with him as secretary for the Directorate of Environmental Health Engineering," said Conlon. "I can unequivocally say that he always looked for opportunities to challenge, inspire, and nurture others to develop new professional skills and grow. He is a caring person."

Phull completed the basic combat training at Fort Ord, California. His first Army assignment was at the U.S. Army Mobility Equipment, Research, and Development Command, Fort Belvoir, Virginia; now a part of the Tank and Automotive Research, Development, and Engineering Center. He was commissioned in the Medical Service Corps in January 1977. From 1977-1979, he worked as a project officer at the U.S. Army Environmental Hygiene Agency, Regional Division, North, Fort George G. Meade, Maryland now CHPPM-North. From 1979-1983, he served as a project officer, and later as chief of the Laboratory and Environmental Health Divisions, at the U.S. Army Pacific Environmental Health Engineering, Camp Zama, Japan now CHPPM-Pacific. From February 1984 to September 1986, Phull served as the Engineer Staff Officer in the Office of the Deputy Chief of Staff, Engineer, U.S. Army Europe, Heidelberg, Germany. From 1986 to 1989, he worked as the Branch Chief and Program Manager for Water Supply Management in the Water Quality Engineering Division of AEHA, now CHPPM.

Phull was a doctoral student at the University of Maryland at College Park from 1989-1992. In 1992, he was assigned to the U.S. Army Toxic and Hazardous Materials Agency; now known as the U.S. Army Environmental Center, Edgewood, Maryland, where he served as the Deputy, Technical Support Division, and later as the Acting Division Chief. In June 1995, he assumed command of AEHA-North now CHPPM-North, Fort George G. Meade, Maryland. Phull was then assigned to CHPPM in June 1995, where he served as

the Director of Administrative Services, as well as the Executive Officer and Troop Commander until February 1996. Phull served as the Director of Environmental Health Engineering, CHPPM, from February 1996 to July 1998. He served as the commander, CHPPM-Pacific, Camp Zama, Japan from August 1998 to August 2000. He was assigned to the Office of the Assistant Secretary of the Army (Installations and Environment) where he worked from August 2000 to September 2001 as the Military Assistant for Occupational and Environmental Health to the Deputy Assistant Secretary of the Army for Environment, Safety, and Occupational Health. Phull is currently serving as the Director, Environmental Health Engineering, where he is responsible for directing the efforts of six Army Programs that address the health effects of all environmental media (air, water, soil) and environmental noise.

Phull's military awards include the Legion of Merit (2nd oak leaf cluster), the Meritorious Service Medal (5th olc), the Army Commendation Medal (3rd olc), the Army Achievement Medal, the Air Force Achievement Medal, the National Defense Service Medal, and the Army Good Conduct Medal. He is a member of the Order of Military Medical Order, is a registered Professional Engineer in the State of Colorado, and holds the "A" Proficiency Designator for Sanitary Engineering - the Army Medical Department's highest award for professional excellence.

Phull has been married for 31 years to Neelam (Seth) Phull of Jaipur, India. They have two sons, Anil who is married to Seema, two grandsons Arjun and Suraj, and Atul who is married to Rashika. Phull and Neelam currently reside in Odenton, Maryland with his parents, Rajinder Nath and Kailash Wati Phull, Seema, Arjun, and Suraj. Phull plans to visit India with his father sometime next month in order to take care of family issues in India, and return to the U.S. to experience a new phase of life.

Approximately 140 family members and friends joined Phull and Neelam at the Bayou Restaurant in March to bid their farewell to the Phulls. After a wonderful invocation by Dr. Steve Richards and the National Anthem on the cello by MAJ Thomas Timmes, BG Bester, COL Robert Thompson from

the Office of the Surgeon General, Steven Kistner, Subordinate Commanders, DEHE Program Managers, Phull's dad, and his son Anil and daughter-in-law, Seema, paid tribute and presented mementos to the Phulls. The highlight of the farewell was a slide show put together by Conlon with help from Mrs. Phull that showed family and Army photos of Phull's life to-date. "I am not an emotional person, but the slide show made me cry," said Kistner in his remarks. In his concluding remarks, Phull recognized and thanked a number of people who had helped him during his wonderful Army journey. Throughout his remarks, he reiterated his "lessons learned" during his Army career. That mirrored what I have heard him say in our daily conversations - "the Army taught me the value of mentorship, family, and caring for those you are responsible for." The parting advice he offered was also no different than what I had heard him tell me and his staff over and over again - set and strive to achieve high standards, do the best you can without thinking about the rewards, seek self-improvement, don't be afraid to make a mistake as long as you learn from that, accept constructive criticism, seek counsel and guidance from those more experienced than you, and always be prepared to mentor the junior and less experienced.

We will miss KK, his smile, his good attitude, gentlemanly behavior at all times, and above all, his demonstrated concern and respect for his fellow human beings.



BG Bester congratulates Phull on his retirement.

EVIDENCE THE ARMY CARES ABOUT SOLDIERS

(continue from page 3)

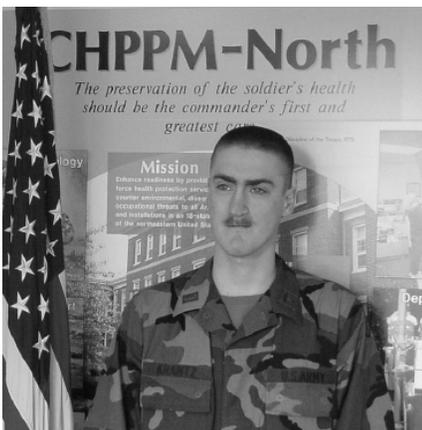
out of CHPPM throughout their careers, military personnel can make an invaluable contribution to setting strategic and operational priorities. This knowledge of where the Army is headed, and being familiar with the challenges faced by the Army, the AMEDD, and particularly Army Preventive Medicine at the grass roots level, should help CHPPM as an organization consistently tailor and refine/refocus its support so that CHPPM is never made obsolete or irrelevant to our primary customer: the soldier and his family.

Debate over the relative importance of the technical staff versus support staff reminds me of those bad jokes where parts of the body are arguing over who is most important: Brain, lungs, heart, etc. Obviously the technical staff serves as the “point of the spear” for a scientific organization like ours. But without first-class logistics, information management, and resource management support, CHPPM becomes unable to perform to expectations, or even to perform at all.

CHPPM faces significant challenges in the next 2 through 5 years. Everyone is aware of our need for a new campus here at Edgewood. But even more important will be meeting our human resource needs. As our senior civilian staff retires, who will replace them? How do we best provide the combination of pay, training opportunities, and job security that will continue to make CHPPM a desirable place to work for our civilians? For military personnel, how do we ensure that junior officers and enlisted soldiers are utilized in a manner that prepares them for their next assignments? Our folks in uniform are called first and foremost to be good soldiers; how do we help them to be so?

Although I have spent most of my 22 years in Army Preventive Medicine outside of the Army Environmental Health Agency and CHPPM, I am convinced that there has never been a better time to serve in this organization. I’m looking forward to the next several years as an opportunity to join a great team working to answer the questions I’ve raised above and make CHPPM stronger and more cohesive. With our success, future commanders will not have to make statements like I did at Fort Lewis back in 1999. The audience will already know that CHPPM is proof that the Army cares about its people.

NEW FACES AT CHPPM



2LT Jason Krantz joined CHPPM-North in April as an Environmental Science Officer assigned to the Field Preventive Medicine Division. Krantz has four years of active federal service as a Preventive Medicine Technician. His assignments include: the 30th Medical Detachment, Yong San Korea, Yuma Proving Ground, Arizona, and a year and a half at CHPPM. Krantz is married to Mary, and they live in Fort Meade, Maryland.

(photo provided by: CHPPM-North)

(continue on page 11)

CHPPM-PACIFIC GETS – A2LA ACCREDITATION

By: James Ito
CHPPM-Pacific

Like many commercial laboratories, CHPPM-Pacific, Environmental Laboratory Division, realizes the importance of “laboratory accreditation.” For the past year, we painstakingly made changes to transition from ISO 9000/Guide 25 requirements to ISO 17025.

In March of last year, we applied for accreditation renewal. Along with our application, our Standing Operating Procedures and Quality Manual were submitted for review. On May 14, 2002, we were informed that Mr. Ronald Peters, Certified Industrial Hygienist, Peters Consulting, Incorporation, Moraga, California, would be conducting the renewal audit. The audit was performed August 6 through 9, 2002. During this audit, documents, administrative records, analytical data, and actual performance of procedures were assessed. We were cited several nonconformances which we addressed and submitted evidence of corrections on October 7, 2002. Clarification and additional information was requested by A2LA, and these tasks were completed and submitted on November 21, 2002.

A2LA accepted our corrective actions in December. The ELD accreditation was extended to March 21, 2004. The laboratory was accredited for drinking and wastewater and environmental lead analyses. Currently, we are working with our Environmental Health Division to add Colilert testing to our scope of accreditation during the next audit.

(photo provided by: CHPPM-Pacific)



CHPPM-Pacific's Environmental Laboratory Division with new ISO 17025 accreditation documents. Left to right: Hiroaki Tani, Saengkham Darawong, Bill Patry, Ryuko Tanaka, CPT Evan Tillman, Izumi Takabayashi, Mike Cross, James Ito, Tim Attig, Masako Kondo, SGT Aku Johnson, Keiko Eguchi, SGT Kevin McElvany, SPC Robert Rossman, and PFC Kristin Havrilka.

HEALTH TEAM ASSESSES HAZARDS FOR SOLDIERS

By: MAJ Annette Hildabrand
CHPPM-Europe

A team from CHPPM is currently deployed to Kuwait to conduct environmental health assessments. The team, consisting of service members and Department of Defense civilians, advises commanders on occupational and environmental health hazards and makes preventive medicine recommendations to minimize exposures. The team provides real-time assessment of environmental hazards while troops are deployed in theater.

These environmental assessments, which are required by DOD directives, consist of collecting, analyzing and assessing potential health hazards associated with the deployment of soldiers. To date, the team members have collected air, soil and water samples from eight troop locations in Northern Kuwait. The environmental health assessments are part of a comprehensive force health protection plan.

Preliminary site surveys were done at several locations, but with the expansion of base camps and increase in troop numbers, more comprehensive surveys were needed. The team looks at a wide variety of environmental hazards such as heavy metals, pesticides, potential radiation sources and occupational hazards. The team also measures the size and amount of dust particles in the air.

The CHPPM team come with a variety of specialties including environmental engineering, environmental toxicology, veterinary, preventive and environmental medicine, epidemiology and health physics.

The team has direct reading instrumentation to give on-site commanders immediate results. Team members also collect samples for shipment back to accredited environmental laboratories in Germany and the U.S. for thorough analysis. Results are then transmitted via email to the team at Camp Doha, Kuwait.

The CHPPM team is currently based out of Camp Doha and will conduct occupational and environmental assessments in forward deployed locations after coalition forces secure these areas.



CPT Phillips works with the High Volume sampler at Camp Udairi.

(Photo by: CPT Trina Powell)

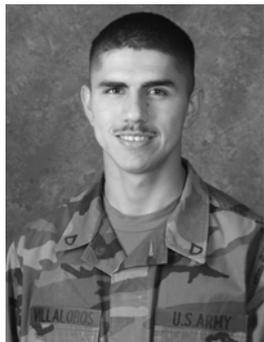


CHPPM members are setting up instrumentation for air sampling at Camp Arifjan.

(Photo by: Thomas Sherbert)

NEW FACES AT CHPPM

(continued from page 8)



PFC Raul Villalobos joined CHPPM in March and is assigned to the Cholinesterase Reference Laboratory, Directorate of Laboratory Sciences. He has always pursued a career in the medical field and has experience in nursing and pharmacology. Villalobos was born in Mexico but has spent the last eighteen years in El Paso, Texas. He hopes to earn his degree in Medical Laboratory Sciences in a couple of months from George Washington University. In his free time, you can find him fine tuning his guitar skills or working and restoring old Ford Mustangs. He owns a 1971 and a 1973 Mach I. Villalobos is married to Daisy a native of Mexico and they live in Edgewood, Maryland.



Steve Richards joins us again, this time as a civilian assigned to the Field Water Section of the Water Supply Management Program in the Directorate of Environmental Health Engineering. He comes to us having retired as a Colonel from his last military assignment at 18th Medical Command, Yongsan, Korea, where he served as the Sanitary Engineering Consultant and Chief, Environmental Health and Industrial Hygiene. Prior to that assignment he was the director of DEHE. He is happy to be back here with his wife, Carol, living near one of their four

grandchildren, and working among the CHPPM family members with whom he served a total of 14 years of his military career.



Freda Washington joined CHPPM-South in March and is assigned to the Environmental Health Engineering Division. She attended Tuskegee University and Georgia Institute of Technology, and previously served on active duty as a Sanitary Engineer. She enjoys traveling and meeting people.



Katarina Ashburn is a registered dietitian assigned as the Health Promotion Coordinator for the 26th Area Support Group at CHPPM-Europe. She received her Master's in Community Nutrition from Cornell University and her Bachelor's from the University of Florida in Food Science and Human Nutrition. After completing her Master's, she worked as the nutrition supervisor for the Sumner County Health Department in the Nashville, Tennessee area. While with the health department and Women, Infants and Children program, she developed a passion for working with maternal and child nutrition and lactation program. She looks forward to bringing her nutrition expertise to the Directorate of Health Promotion and Wellness. Since her January arrival in Germany, she has enjoyed traveling and sampling the variety of European cuisines.

Welcome

HOOAH! A CHPPM DINING-IN

By: LTC Mary Laedtke
Directorate of Health Promotion and Wellness



The President of the Mess, BG Bester, MAJ Cheryl Cameron, MAJ Sonya Corum and COL Mary Lopez pose for a picture before the ceremony.

It took almost 10 years for CHPPM to have another Dining-In, but those in attendance will tell you it was worth it! The event was held at the Edgewood Area Gunpowder Club on March 21, and over 50 military members from CHPPM were in attendance. The President of the Mess, BG Bester, and Mr. Vice, MSG Jerry Beatty, made certain all the rules of the mess were followed or the offenders were duly punished.

The evening began with a social hour; a time when members of the mess could enjoy some liquid libation, a few jokes, and an opportunity to look for uniform violations that they could share with the President of the Mess or Mr. Vice, later during the evening. A small jazz combo from the DC Army National Guard, 257th Army Band, provided a wonderful variety of background music. At 1855 hours, "Mess Call" was sounded and the mess assembled for dinner. As they approached their tables, they noticed some unique touches to this Dining-In. Instead of china and crystal from which to eat and drink, the members of the mess had field mess kits to eat from and mess kit silverware to eat with. Instead of a water glass, they had a water-filled canteen, and instead of a china coffee cup, they had a metal canteen cup. There were no wine carafes to be found, as the wine was put into field expedient mouthwash bottles and were appropriately colored blue, green, and gold.

CHPPM's own Color Guard presented the

colors followed by a very moving rendition of The National Anthem played by Directorate of Environmental Health Engineering's, own MAJ Thomas Timmes on cello. He was accompanied by SGT Latisha Houston, DC Army National Guard, 257th Army Band, on keyboard. Traditional toasts were offered by various members of the mess. The most moving and most prophetic one was the last one, which was to "our fallen comrades."

The solemn mood of the toasts was quickly followed by the fun of "The Grog Ceremony," a traditional event that required various members of CHPPM to contribute "fluids" to the grog bowl, which was a toilet, complete with reserve tank and toilet bowl. SGT Joseph Newton, Directorate of Laboratory Sciences, lead off the "contributions" by adding blood, soil, and sweat. LTC (P) Michael Custer, DHPW, added a variety of items to include Vit "V", Clairol hair coloring, worms, and broccoli; LTC (P) Thomas Logan, Deputy Chief of Staff for Operations wanted to make sure he was absolutely sure he got it right, with his addition of Absolute Vodka; MAJ Michael Dyer, Directorate -DCPM added a questionable murky concoction of toxic industrial chemicals (tics), squalid water, raw sewage and ear wax, while LTC Mark Melanson, added a combination of radioactive fluids. A fully camouflaged MAJ Michael Salamy, added the final



Full attention is given while CSM Jack Clark discusses the value of today's soldiers and the soldiering experience.

missing ingredient, an old dusty Army sock. The task of testing the questionable concoction fell to the most impartial, unbiased military member at CHPPM, LTC Vergel Layao. Layao found the brew needed an extra ingredient that only he could produce and supply!

A delectable buffet of beef, chicken, vegetable lasagna, and numerous side dishes tempted the members of the mess. However, before the members were able to partake, they had to “earn the right” to eat. The members of each table had to “entertain” the head table. If the members had satisfactorily completed the task, they could go to the buffet. If, however, the activity lacked entertainment value, the table members were gonged and sent back to try again. A wide variety of talent was displayed that evening. Those who earned a big “thumbs-up” and a green light for the buffet included; a “hot” display of talent by the DCSOPS CHPPM-ades Logan and CPT Kenneth McPherson; an impressive Native American turkey call by COL James Little; and numerous limericks and raps. Those that didn’t make it and were gonged included a dramatization of the CHPPM Command Group if they found themselves in “the big sand box;” a kazoo rendition of “Stars and Stripes Forever;” and a really hip version of “Funky Town.” While the ladies looked great with their disco ball earrings and the guys were really “with it” in their “afros,” the group was sent packing due to LTC Timothy Mallon’s lack of rhythm!!

The group was brought back to the real reason to get together for the evening during the MEDCOM SGM’s talk. CSM Jack Clark, Fort Sam Houston, Texas discussed the value of today’s soldiers and the soldiering experience. His talk was followed by a special video presentation put together by COL Paul Little of Soldiers Radio and TV. His presentation, “We are CHPPM, the U.S. Army, and Proud Americans” highlighted the numerous past deployments that involved CHPPM soldiers.

When the gavel was struck for the last time and Mr. Vice excused the members of the mess, all agreed, it was an evening of camaraderie among the members of CHPPM. It was an opportunity to celebrate the rich traditions that are part of military life and being members of the “profession of arms.”

(photo’s courtesy of Ethel Kefauer, Visual Information Division)



HOOAH! A fully camouflaged MAJ Michael Salamy.



CHPPM’s optometrist gather together for a group photo at the Dining-In.



CHPPM Command Group’s hip version of “Funky-Town.”

(photo’s continue on page 21)

THE ABCs FOR HEALTHY LIVING

By: LTC Deborah Simpson
Directorate of Health Promotion and Wellness

The American Dietetic Association promotes March of each year as National Nutrition Month. Although, healthy eating promotes good health, this does not have to mean feeling guilty and deprived. You can enjoy any food in moderation. Just watch what you eat over several days instead of focusing on just one day or one meal.

Healthy eating can be as easy as your ABCs, if you follow the three basic messages of the Dietary Guidelines for Americans, 2000:

- Aim for Fitness.
- Build a Healthy Base.
- Choose Sensibly.



Aim for Fitness

Achieving and maintaining an appropriate weight is a key component of good health. Being overweight or obese increases your risk for heart disease, stroke, high blood pressure, high blood cholesterol, diabetes, arthritis, certain types of cancer, or breathing problems.

A weight for height table can give you an idea of how your weight compares to a healthy weight. If you exceed the recommended weight, have trained military personnel measure your body fat.

Excess body fat located in the stomach area around the waist increases the risk for certain chronic diseases. Men and women are at a high risk if their waist circumference exceeds 40 inches and 35 inches, respectively. Body Mass Index (BMI) provides an indication of relative weight for height and can be used to determine if you are underweight, overweight, or obese. For most individuals, it provides a good estimate of body fat and has a strong correlation with relative risk of disease and death and the incidence and risk of cardiovascular disease. Use the following formula to calculate your BMI: [weight in pounds divided by height in inches squared] x 703. The BMI for a woman who is 5'4" and weighs 120 pounds is [120 divided by (64 x 64)] x 703 = 20.5

BMI Weight Classifications are as follows:

- A BMI less than 18.5 is considered underweight.
- Goal BMI is 18.5 – 24.9.
- A BMI of 25 – 30 indicates overweight.
- A BMI of 30 or higher indicates obesity and potential serious health risks.

You also need to move your body to be healthy. Aim for at least 60 minutes of moderate physical activity each day. You will get the same benefits by doing all of your exercise at once or by spreading it out over the course of the day. Choose activities that you enjoy and vary those activities. If you are currently inactive, consult your doctor before starting an exercise program.

Build a Healthy Base

Use the Food Guide Pyramid in making food choices. Eating a variety of foods from each food group will provide the nutrients your body needs. The foundation of your diet should include 6 to 11 servings from the Bread, Cereal, Rice and Pasta Group. These foods provide energy in the form of carbohydrates, B vitamins and fiber. Eat at least 3 servings of vegetables and 2 servings of fruits each day for beta-carotene, Vitamin C, folate, and fiber. Eat 2 low-fat servings from the Milk, Yogurt and Cheese Group (provides protein and calcium) and the Meat, Poultry, Fish, Dry Beans, Eggs, and Nuts Group (provides protein and iron) each day. Fats, oils, and sweets provide taste and enjoyment to meals. Some fats also provide essential fatty acids.

(continued on page 22)

2,000+ SOLDIERS STABILIZE THEIR HIGH SCHOOL SENIORS

Almost 2,200 military families have joined the stabilization program for soldiers with high school senior students.

Officially called "Stabilization for Soldiers – High School Seniors," the program began in April 2001. It allows those soldiers to extend their tour of duty at their current duty station for an additional year so a family member can graduate from their school.

As of February 6, the Army's Personnel Command had approved stabilization requests for 1,826 enlisted soldiers, disapproved and had 20 requests pending. On the officer side, 353 were approved, 6 disapproved and 2 requests were pending. For enlisted soldiers that's a 99.8 percent approval rate and 98.3 percent for officers.

"In my book, that is a success," said COL Julie Manta, Training and Doctrine Command Adjutant General.

"This is a super initiative by the Army leadership to stabilize families. That's a key component of Army Well Being, to provide some stability and predictability for family members."

Soldiers, who have children in high school must request stabilization from PERSCOM before their children begin their high school junior year.

The request is made on a DA Form 4187. A soldier must list known scheduled temporary duty for a training course and other purposes. "Officers need to contact their branch assignment officers if they are scheduled for training at the end of their current tours," Manta said. "That will tell the branch that the training requirement may have to be deferred."

Soldiers overseas must indicate they will extend their tour there if the request is approved.

A letter from the high school, stating when the student is expected to graduate from the school, must be attached to the DA Form 4187.

The program is spelled out in Military Personnel Message Number 01-135. It is on the PERSCOM Web site at <http://www.perscom.army.mil>. Select the AG page and the list of MILPER messages can be

found there.

"When soldiers requests are approved, that does not preclude them from being deployed or being alerted for deployment," Manta said. "But at least family members do not have to suffer the additional disruption of having to move while the soldier mothers or fathers are deployed. She said PERSCOM does not track approval rates by major command.

"That's because assignments are made as individual replacements."

PERSCOM has said that 48 percent of enlisted soldiers who have received approval are sergeants first class.

"That sounds right," Manta said, "Many soldiers in that rank are old enough to have children in high school. I suspect that on the officer side mostly field grade officers request stabilization for family member of high school age."

The stabilization program was one of the 10 top recommendations from a July 2000 Army Education Summit. General Eric K. Shinseki, Army Chief of Staff, approved it in time for it to take effect the following April.

(Army News Service)



HEALTHY EATING WHILE DEPLOYED

By: MSG Jennifer V. Brown, Nutrition Care Specialist
Directorate of Health Promotion and Wellness

Healthy soldiers are valuable assets to the U.S. Army especially during deployment missions. The Army's goal is to improve and protect the health of troops during deployments, because a healthy soldier will do his best when he feels his best. Healthy eating during deployment is crucial and is the soldier's responsibility. In addition, it adds to his mental alertness and physical stamina.

Soldiers not eating the right amount and kinds of food can cause barriers to his and the unit's performance such as, fatigue, dehydration, constipation, diarrhea, emotional instability and muscle loss during deployment; however, knowing the importance of nutrition in the field can help a soldier overcome these barriers. Good nutrition in the field means eating a regular high carbohydrate, low fat diet with adequate protein, vitamins and minerals at least 3 times a day.

RULE OF THUMB	WHY	FOR TOP PERFORMANCE
EAT THE RIGHT AMOUNT OF FOOD	Food gives you energy. Not enough food = fatigue. Too much food = unwanted pounds.	Balance food intake and physical activity ... energy in, energy out.
LOTS OF CARBOHYDRATES	Energy nutrient for a quick start, short bursts of energy, and the long haul. Prevents fatigue by maintaining blood sugar and filling energy-giving glycogen stores.	55-70% of your calories—400-500 grams a day—should be carbohydrates.
ADEQUATE PROTEIN	Builds and repairs muscles and tissue. Needed to heal wounds and fight infections.	Total daily protein intake should be 12-15% of calories or 60-150 grams.
LOTS OF FLUIDS	Prevents dehydration, which reduces physical and mental performance.	Drink frequently, at least 4-6 quart canteens a day.
NOT TOO MUCH FAT	Burned for energy, but slow to kick in. Body stores plenty of fat. Too much fat fills you up before you get enough carbohydrates, your premium energy nutrient.	If you get 400-500 grams of carbohydrates in the field, 30-35% of calories from fat (amount of fat in rations) are fine.
VITAMINS AND MINERALS	The spark plugs in your engine; they keep body functions running smoothly.	Eat a variety of foods. Operational rations provide adequate quantities of vitamins and minerals if you eat all components.

Energy Needs

Energy needs increase while in the field environment due to higher physical demands. The climate can also affect energy requirements, for example, working in cold weather can increase energy needs by 10 to 25 percent and operations in high altitude areas can increase energy needs by 50 percent or more. Weight loss during deployment should be taken seriously. A quick weight loss during deployment can be detrimental to your health and performance by leading to fatigue and loss of strength. You must fuel your body with a combination of nutrients by eating the entire field ration or at least some of each item. Eating snacks every 3 to 4 hours will keep your stamina up and your morale high.

Food Safety in The Field

Do not consume unapproved food, water, or ice sources and or food items that have been improperly stored. Purify any water, ice or snow used for drinking. Protect food and beverages from insects, rodents, dust and humidity. Consumption of unapproved food sources, improperly stored food, and unpurified water sources can lead to life threatening disease or illness.

Operational Rations

Operational rations or combat rations meet the nutritional needs of the soldier when in extremely intense and highly mobile combat situations and other contingency operations.

Different types of operational rations are used in the field: General-purpose rations, special purpose subsistence and survival rations. The most popular operational rations are Meal Ready to Eat, Individual Unitized Group rations, and the Unitized B rations. The MRE gives you the most nutrition in the smallest package. They are made with real food. Each MRE has 35 percent calories from fat, 1200 to 1300 calories and the six essential nutrients - carbohydrates, protein, fat, vitamins, minerals and water. Some parts of the MRE have extra nutrients, which means when you eat only a part of the MRE, you are still getting a well-balanced diet. If you can't or don't want to eat all the food in the MRE do the following:

- Eat a part of each component to get a good balance of nutrients.
- Eat the bread/cereal/pasta/rice part first for energy.
- Save unopened dry snack items to eat when you are on the move.

Readiness Nutrition

Paying attention to your nutrition is important, because everything you eat will contribute to your failure or success as a soldier. Keep in mind no one can do your job with your pride, your discipline and your courage. One of the most important things you can do for your health is to eat a balanced diet high in carbohydrates, low in fat, with a balance of other nutrients, including protein, vitamins and minerals. Eating right helps you perform at your highest level, gives energy and endurance, helps you think clearly and helps you stay confident and motivated.

More Nutrition Information

Visit this website for more nutrition information: <http://chppm-www.apgea.army.mil/dhpw/Wellness.aspx>



I HAD PERFECT HEARING BEFORE...

Many soldiers take their hearing for granted, but one soldier has a new respect for the luxury of sound. SSG Todd Hafer of Fort Riley, Kansas, has lost most of his hearing in one ear.

Hafer had no idea that a hearing test could have caught the warning signs of cholesteatoma, a benign growth of skin in an abnormal location such as the middle ear.

"I had perfect hearing before. Now I have less than 30 percent of my hearing in my left ear," said Hafer. "I have only one of the three bones in my ear, with no ear canal."

If left untreated, cholesteatoma can cause an erosion of the bones behind the eardrum, leading to severe hearing loss.

The initial signs of a cholesteatoma are drainage from the ear canal, a full feeling or pressure in the ear, along with hearing loss.

Without the bones in the ear, sound cannot be transferred to hear, said Hafer.

In late 2001, Hafer had his hearing tested after feeling the warning signs that something may be wrong.

"I got motion sickness and I had a hard time even driving or riding in cars," he said.

"The last hearing test I had before the one in July 2001, when they found my problem, was in Korea in 1998," said Hafer. The test in 2001 showed a 40 percent hearing loss.

"Everyone should receive annual hearing loss screening," said Irwin Army Community Hospital audiologist 1LT Jillian Kibby. It is not a full diagnostic test but its purpose is to have a first initial screening to compare with future screens to detect damage.

"Since my activation here, I've even caught two early cases of possible otosclerosis, a treatable hearing loss that usually goes undetected unless the individual happens to have a screening or the loss progresses to the point that the individual notices it," said Kibby.

Kibby said that noise-induced hearing loss is painless, progressive, permanent and preventable.

"Hearing loss is the most common, yet

preventable injury in the Army," she said. "By the time soldiers realize a problem with their hearing, it is too late."

"I can't say that the test would have caught it, but in my case it would have helped," said Hafer. "The hearing test was a way of finding the problem."

He said he did not have his hearing checked earlier because no one specifically recommended it, and there was no hearing van at the time.

Hafer was a mechanic before losing his hearing. "I haven't worked in my job since my first surgery," he said.

He underwent two surgeries to remove his ear canal and all parts of the ear except one bone.

"They drilled out my skull twice and cut the back side of my ear from top to bottom," he said. "As far as being disabled, I have to go to the hospital every six months to have my ear cleaned out. I can't do it by myself anymore."

"Hearing loss is a serious condition that could determine if soldiers are fit to perform their assigned duties, which could result in reclassification or maybe even a medical discharge," warned SSG Tyrone Manning, Noncommissioned Officer-in-Charge of the Ear, Nose, Throat and Audiology Departments at Irwin Army Community Hospital, Fort Irwin, California.

Reconstruction surgery is available. However, there is a less than 50 percent chance that 50 percent of the hearing will be restored, said Hafer.

"The surgery is risky because it could affect nerves in the brain causing uncontrollable facial movements."

"My Army career is almost over," said Hafer, "and I am being sent to the Military Medical Review Board."



(Fort Riley, Kansas, Post)

POISONINGS – A COMMON OCCURRENCE

By: COL Frances J. Sorge
Directorate of Occupational Health Sciences

Ten million cases of poisoning occur in the United States each year. In 80 percent of the poisoning cases, the victim is a child under the age of 5. Curiosity, inability to read warning labels, a desire to imitate adults, and inadequate supervision are reasons why childhood poisonings occur. The elderly are the second most likely group to be poisoned due to mental confusion, poor eyesight, and the use of multiple prescription drugs. Poisonings may also be intentional as suicide attempts or drug overdoses.



Poisons exist in everyone's environment as products that are:

- never meant to be ingested or inhaled such as pesticides, houseplant leaves, shampoo, and tobacco; or
- meant to only be ingested in small quantities and are harmful if they are taken in large amounts such as prescription drugs, medicinal herbs, or alcohol.

Other types of poisons include:

- bacterial toxins that cause food poisoning,
- heavy metals, such as lead, found in paint in old houses, and
- venom found in the bites and stings of some insects and animals.

How are Poisonings PREVENTED? Do the following:

- Keep chemicals and medicines out of reach, out of sight, and preferably locked up.
- Never let products out of your sight when they are in use.
- Apply pesticides ONLY after removing children and their toys from the area.
- Store medicines separately from household products.
- Store chemicals away from food.
- Keep all items in their original containers.
- Always leave the light on when giving or taking medicines.
- Always wear your glasses, if you wear glasses, when looking for, measuring or taking medicines.
- Do not take medicines in front of young children because they like to imitate adults.
- Refer to medicine as medicine, not "candy."
- Use safety packaging properly by closing the container securely after use.
- Clean out medicine chests and dispose of unused medications periodically.
- Mark poisons with skull and crossbones or "Mr. Yuk" stickers, and teach children not to touch anything with these labels on them.

What do you do if someone is poisoned? Remain **calm** and do the following:

- Call the operator or emergency number. Numbers should be listed on or near the phone before an emergency arises.
- Follow first aid instructions on the label of chemicals or products.
- Give these facts to the Poison Control Center: Victim's age; weight; existing health conditions or problems; substance involved; including if it was swallowed, inhaled, absorbed through skin contact, or splashed into the eyes; any first aid given; if the victim vomited; your location; and how long it will take you to get to the hospital. Induce vomiting only when it is first aid for the product taken or when you are directed to do so by the Poison Control Center.

BEGIN WHERE YOU ARE

By: Carlla E. Jones
Directorate of Health Promotion and Wellness

You made a New Year's resolution to be healthier, maybe by losing weight, exercising more, or quitting smoking. You just made up your mind to change a habit or a part of your lifestyle in order to improve your overall well-being. You made a plan! You started a new behavior! You finally took a step towards better health!

Then – it happened. You slipped back into the “old habits” and “old behaviors.” And now, you're waiting for just the right moment to come along to get started again. You're waiting for:

- Tomorrow
- Next week
- Next month
- Next year...

You're waiting until 'just the right time' to begin anew, as if something magical will happen during this time of inaction. More often than not, however, waiting does nothing more than to stall the motivating forces that got you started on the road to better health. Once those forces are stalled they can be very difficult to start again.

So what can you do when you slip up in your resolution for better health? Just start again! Remember, you did not develop a bad habit or behavior overnight, and it will take some time to change that habit or behavior. Neither a minor 'delay,' nor a big relapse in your journey towards a healthier lifestyle should be reason to give up entirely.

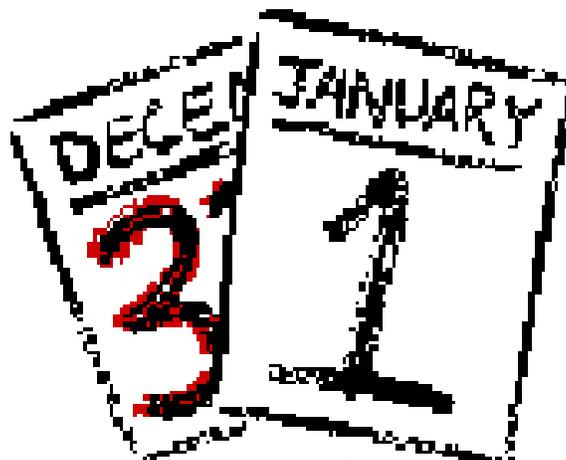
To hold on to motivation is a tricky thing. No matter how firmly your mind is made up to change an unhealthy behavior, you will face challenges to that change and will be tempted to give up.

Try these suggestions to maintain your motivation for change:

- Get back on your pathway to better health immediately. If you strayed from your healthier eating plan at lunch, get back on track this afternoon.
- Remember that developing new habits and behaviors will take some time. Set realistic goals that you can reach in a reasonable timeframe. Once you have reached this goal, set a new one.
- Talk to a family member or friend about your resolution to change. Ask for their advice and support to help you through the challenges.

The key to a healthier lifestyle is to begin right where you are and keep moving towards your ultimate goal of increased health and well-being. Remember that progress may be slow. However, the rewards of better health will be more than worth the length or difficulty of the journey.

To “Kick-Start Your Resolution to Change”: <http://www.hooah4health.com/4change/default.htm>



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CHPPM's Dining-In



A 10-year wait,



but those in attendance will tell you



it was worth it!

THE ABCs FOR HEALTHY LIVING

(continued from page 14)

Choose Sensibly

Choose foods from the Food Guide Pyramid based on your calorie needs. Eat foods high in fat, sugar and/or calories, less often and in small portions.

If you need fewer calories, eat fewer servings of some foods. If you are more active, you can eat more servings. Eating oversized portions on a regular basis can result in weight gain, so watch serving sizes to manage your weight.

National Nutrition Month is the perfect time to focus your attention on your present diet and to make any changes that would benefit your health. Small changes can result in **BIG** improvements in the way you look and feel. For more information, refer to the following web sites:

- The U. S. Army Center for Health Promotion and Preventive Medicine (<http://chppm-www.apgea.army.mil>)
- The American Dietetic Association (www.eatright.org)



SECOND ANNUAL FUN RUN

What started out as a routine Unit run was open to CHPPM-All and changed to a Fun Run/Hat Run. Hanging out with BG Bester on St Patrick's Day for a Fun Run proved to be great fun for 65 military and civilian employees.

There was a mass formation behind the Hoyle Fitness Center, in the Edgewood Area where 1SG Robert Carpenter guided the group in their stretching exercises. Then they were off for a 3-mile run in formation with the NCO's calling cadence the entire 3 miles.



1...2...3... Cheese! (l to r) SGM David Vreeland, BG Bester and CPT Joanna Mysen hat it up before the run.



MAJ Cheryl Cameron and MAJ Steven Czerwinski are hat and run ready.

(continue on page 24)



WIC AVAILABLE TO SERVICE MEMBERS

A government-sponsored supplemental food and health education program is available to service members and their families stationed stateside and overseas.

The Special Supplement Nutrition Program for Women, Infants and Children, commonly known as WIC, has been offered to troops and their families in the continental United States since 1972. WIC became available to military families across Asia and Europe beginning January 2001.

"Today, about 25,500 service members participate in the WIC Overseas program," said Danita Hunter, the WIC overseas program manager at the TRICARE Management Activity Headquarters in Falls Church, Virginia. WIC provides dietary advice and nutritious food to pregnant women, new mothers, infants and toddlers, she said. Participation is based on income, family size and nutritional need.

The Department of Agriculture administers the program stateside, where WIC serves 45 percent of all infants born in the U.S. Hunter noted. Overseas, WIC is co-managed by TRICARE, medical and Defense Commissary Agency officials.

WIC participants receive health screenings, nutritional education and health counseling services. Those in stateside programs receive vouchers redeemable at local stores for milk, baby formula, bread, cheese, cereals, fruits and vegetables. Service members stationed overseas receive WIC-approved foods at military commissaries and Navy exchange markets.

"I consider WIC to be a valuable health

program," Hunter said. She noted that some military families, like their civilian counterparts, might simply have too many people to adequately feed on a particular income.

"Family size is indeed considered as a factor in determining eligibility for the program," Hunter said. Income alone, she pointed out, is not the determining eligibility factor.

"We want all our children to be healthy," Hunter remarked, "and medical studies show that children who receive a nutritious diet develop more robust immune systems than those with unhealthy diets. This decreases the possibilities of infections or diseases."

Service members serving stateside who want to sign up for WIC can inquire at their installation family support office. For details on WIC, eligibility rules, income tables and more, visit the Agriculture Department's WIC Web site at www.fs.usda.gov/wic

The site includes lists of participating state agencies addresses at <http://www.fns.usda.gov/wic/Contacts/ContactsMenu.htm> and local and toll-free phone numbers at <http://www.fns.usda.gov/wic/Contacts/tollfreenumbers.htm>

Troops stationed overseas, should note there are WIC offices in Germany, England, the Netherlands, Iceland, Spain, Belgium, Turkey, Italy, Japan and South Korea.

For more overseas information, visit TRICARE's WIC Web site at tricare.osd.mil/wic/default.htm

(American Forces Press Service)

PROMOTION

(continued from page 4)



SFC Jerry Beatty was promoted to MSG in March by BG Bester. He is the Operations Noncommissioned Officer-in-Charge, assigned to the Deputy Chief of Staff for Operations. Beatty entered active duty in 1987. His military training and travels include: Fort Dix, New Jersey; Fort Drum, New York; Fort Sam Houston, Texas; Aschaffenburg, Germany; Desert Storm; Schofield Barracks, Hawaii; and Fort Stewart, Georgia. His first duty station was Fort Drum where he served as a Battery Medic in 1/7 Field Artillery walking the gun line in the freezing cold.

Beatty spent over 5 months in the Middle East as the Senior Aid Man. He and two medics personally treated over 600 U.S. and Iraqi soldiers and civilians and evacuated, 119 of them to Echelon II Care. Beatty also delivered two babies for Kurdish families.

Beatty served as a Treatment Noncommissioned Officer, a Senior Treatment NCO, and an Ambulance Platoon Sergeant, and he worked in the Winn Army Community Hospital Emergency Room, Fort Stewart, Georgia, before becoming the NCOIC of a family practice clinic.

He moved on to a special assignment, active component/reserve component duty. His mission was to take weekend soldiers and train, activate, and mobilize them to places such as; Honduras, Bosnia and regular National Training Center/Joint Readiness Training Center rotations.

His career deployments are: JRTC (seven times), NTC (five times), Panama, Thailand (twice), Wake Island, Desert Storm, Somalia, and Honduras. Military awards and decorations include: the Combat Medical Badge, Expert Field Medical Badge, Air Assault Badge, Combat patch, 3ID, Meritorious Service Medal, Army Commendation Medal (3rd award), Army Achievement Medal (8th award) and the Humanitarian Service Award.

He is married to Cheryl, and they have two sons; Jerry Jr., and Devin.

SECOND ANNUAL FUN RUN

(continued from page 22)

There are no winners in a Unit run, but they were all winners for participating.

Refreshments were provided after the run and awards were given to the best hat which were CPT Jennifer Cummings and Ned Hodebeck. Best dressed went to LTC Mary Laedtke, and good sport awards were given to BG Bester and Steve Kistner.

This is the Unit's second Fun Run (the first was during the Christmas holidays). The Fun Run was a success and all who participated had a great time. Check your calendars for future Fun Runs.



(l to r) 1LT Tanya Garcia, CPT Jennifer Cummings, and Scott Goodison strike a pose as other runners admire their hats.



Line-em up, stretch-em out, and move-em out!



THINK OPSEC

Do observe and report:

- Unusual or suspicious activity or suspected surveillance
- Unusual questions or requests for information relating to capabilities, limitation, or operational information
- Unusual contacts on or off post
- Unusual aerial activity near or around installation
- Any possible compromise of sensitive information

Do not:

- Discuss any aspect of military operations or planning
- Discuss military capabilities or limitations
- Discuss force protection measures, capabilities, or posture
- Disclose any information related to unit deployments

Report all unusual or suspicious activity or suspected surveillance immediately to:

- CHPPM-Main call: 410-436-2222
- CHPPM-Europe call: 486-8106 or 486-8084
- CHPPM-Pacific call: 315-263-8501 or 090-6185-5505
- CHPPM- North call: 301-677-6622
- CHPPM-South call: 404-202-7822
- CHPPM-West call: 253-967-3107



(Watch Card, APG News)

OUTSTANDING EMPLOYEES!

Two employees were recently honored in recognition of their demonstrated standard of performance that is a credit to both them and the Department of the Army. They each received a Quality Step Increase that is the highest monetary award presented by CHPPM. In order to receive a QSI, each had to exceed the expectation of their job description and performance plan on a continuous basis throughout the entire rating period.



Brenda Wolbert is congratulated by LTC Mark Melanson, Directorate of Occupational Health Sciences and BG Bester on her outstanding performance and professionalism.



Dr. George Luz, Directorate of Environmental Health Engineering and BG Bester poses with Heather Johnson after she receives certificate of recognition as one of CHPPM's outstanding employees.

CIVILIAN EMPLOYEE OF THE QUARTER
1ST QTR, FY03

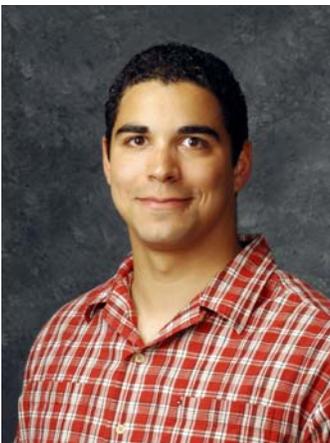


Joyce Kopatch, Deputy Chief of Staff for Information Management, Visual Information Division is recognized for not only her artistic and technical skills, but also for her flexibility and her ability to respond to the needs of her customers. She provides exceptional customer service on a daily basis, just ask any of her customers.

A Heat Injury Prevention program poster, "Heat Can Kill," designed by Kopatch, has been extremely well received and is being posted in areas with high traffic at all Army Basic Training posts. Kopatch's work is always professional and of the highest quality. She devoted late hours to meet this very short suspense from the TRADOC Surgeon.

Kopatch has a BS from Towson University, Towson, Maryland and over 13 years of government experience. She enjoys being outdoors, hiking, swimming and gardening. She also enjoys drawing and painting, but her greatest enjoyment is raising her three children, Amanda, Michael and Zachary.

PROFESSIONAL ASSOCIATE OF THE QUARTER
1ST QTR, FY03



Luis Estrada, Web Developer, Deputy Chief of Staff for Information Management, develops and implements procedures that enhance computer productivity. As a web developer, Estrada was assigned the task of developing a web-based Electronic Timekeeping System/Corporate Information Management Systems interface to eliminate dual input of labor hours for civilian, military, and professional associates assigned to CHPPM. Developing the interface required an in-depth understanding of the existing CIMS timekeeping application, as well as learning the Electronic Timekeeping System program and edits.

Estrada has a BS in Computer Science from Towson University, Towson, Maryland and over eight years of computer experience. Estrada was dedicated to the success of the project and worked well with the CIMS team and DOIM programmers, incorporating additional modifications into the timekeeping function to improve its ease of use. Implementation of the revised procedure in October 2002 resulted in man-hour savings and elimination of mismatched data between the two systems. His performance reflects great credit upon himself and the entire DCSIM organization.

STARS AND STRIPES TO DELIVER PERSONAL MESSAGES FROM HOME

U.S. troops deployed to the Persian Gulf region and other overseas locations can receive personal messages from family members, friends, neighbors, colleagues and supporters via the pages of Stars and Stripes.

“Messages of Support,” a daily section, which debuted March 17, gives family and friends of deployed service members a chance to pass their greetings, words of encouragement and announcements free of charge.

“In the past few weeks, we’ve received a significant number of e-mail messages from spouses, parents, friends and others trying to get in contact with their loved ones serving in the Persian Gulf region. Running messages from folks on the home front seemed like a natural extension of our mission,” said Stars and Stripes Publisher Thomas Kelsch.

“Messages of Support” can be e-mailed to Stars and Stripes 24 hours a day at www.message@estripes.com, messages are limited to 50 words or less and will be printed on a first-come, first-run basis, Stars and Stripes reserves the right to screen and edit all messages and to omit any determined inappropriate.

Stars and Stripes is the editorially independent, Defense Department-authorized daily newspaper distributed overseas for the U.S military community. It provides commercially available U.S. and world news and objective, staff-produced stories relevant to the military community in a balanced, fair and accurate manner. ‘Stripes’ is currently increasing its Middle East circulation with the goal of providing one paper for every three persons stationed there.

(A Stars and Stripes announcement.)

